

<b>QUESTIONNAIRE FOR LMSB INSTRUCTOR, COACH, OJI SUPPORT</b>
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<b>Name</b>		<b>SSN</b>
<b>Contact Information</b>		
Address		
Day Phone	Evening Phone	
E-mail		
<b>Retirement Information</b>		
Date of Retirement	Date of Birth*	
Retirement Claim Number*		
<b>IRS Employment History</b>		
Last two ratings of record		and
Years of experience as an Internal Revenue Agent		
Highest series, grade, and step held: GS , grade , step		
<b>Area of Interest (Check all that apply)</b>		
Instructor <input type="checkbox"/>	Coach <input type="checkbox"/>	OJI <input type="checkbox"/>
<b>Availability</b>		
First date available to work		
Length of availability (e.g., one week, six months, etc.)		
Work schedule: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		
Dates unavailable		
Travel availability (e.g., extended, short-term, none, etc.)		
<b>Annuity* (Please check one)</b>		
I am <input type="checkbox"/> I am NOT <input type="checkbox"/> willing to accept the identified position(s) without a waiver of annuity offset.		
<b>Signature</b>		<b>Date</b>
_____		_____
*Required by OPM		

**Mail to:** IRS, LMSB-HR Planning  
300 South Riverside Plaza  
Suite 700 N, Stop 1650 CHI  
Chicago, IL 60606